

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**

For An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)USE FEC MAILING LABEL
OR TYPE OR PRINT ▼Example: If typing, type
over the lines

ABEL MALDONADO FOR CONGRESS

ADDRESS (number and street)
▼

P.O. BOX 5325

☐Check if different
than previously
reported. (ACC)

SANTA MARIA

CA

93456

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

C00493379

3. IS THIS
REPORT☐NEW
(N)

OR

☒AMENDED
(A)

CA

23

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

☒

April 15 Quarterly Report (Q1)

☐

July 15 Quarterly Report (Q2)

☐

October 15 Quarterly Report (Q3)

☐

January 31 Year-End Report (YE)

☐

Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12S)

Election on

in the
State of

(c) 30-Day POST-Election Report for the:

☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

01

01

2011

through

03

31

2011

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

BRANDON GESICKI

Signature of Treasurer

Electronically Filed by BRANDON GESICKI

Date

07

15

2011

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3**
(Revised 02/2003)

A. Form/Schedule : **F3A**
Transaction ID :

UPDATE SCHEDULE D

SUMMARY PAGE

of Receipts and Disbursements

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FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

ABEL MALDONADO FOR CONGRESS

Report Covering the Period:

From:

M M
0 1D D
0 1Y Y Y Y
2 0 1 1

To:

M M
0 3D D
3 1Y Y Y Y
2 0 1 1

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)).....	10199.00	10199.00
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	10199.00	10199.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	20.00	20.00
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	20.00	20.00
8. Cash on Hand at Close of Reporting Period (from Line 27).....	10179.00	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	1136.85	

For further information contact:

Federal Election Commission
 999 E Street, NW
 Washington, DC 20463
 Toll Free 800-424-9530
 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3 (Revised 12/2003)

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Write or Type Committee Name

ABEL MALDONADO FOR CONGRESS

Report Covering the Period:

From:

M M
0 1D D
0 1Y Y Y Y
2 0 1 1

To:

M M
0 3D D
3 1Y Y Y Y
2 0 1 1

I. RECEIPTS

COLUMN A
Total This PeriodCOLUMN B
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than
Political Committees

(i) Itemized (use Schedule A).....

10000.00

10000.00

(ii) Unitemized.....

99.00

99.00

(iii) TOTAL of contributions

from individuals..... ▶

10099.00

10099.00

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees
(such as PACS).....

0.00

0.00

(d) The Candidate.....

100.00

100.00

(e) TOTAL CONTRIBUTIONS
(other than loans)

(add Lines 11(a)(iii), (b), (c), and (d))

10199.00

10199.00

12. TRANSFERS FROM OTHER
AUTHORIZED COMMITTEES.....

0.00

0.00

13. LOANS

(a) Made or Guaranteed by the
Candidate.....

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS

(add Lines 13(a) and (b)).....

0.00

0.00

14. OFFSETS TO OPERATING
EXPENDITURES
(Refunds, Rebates, etc.).....

0.00

0.00

15. OTHER RECEIPTS

(Dividends, Interest, etc.).....

0.00

0.00

16. TOTAL RECEIPTS (add Lines
11(e), 12, 13(c), 14, and 15)
(Carry Total to Line 24, page 4)..... ▶

10199.00

10199.00

DETAILED SUMMARY PAGE of Disbursements

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	20.00	20.00
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS.....	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ➤	20.00	20.00

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	10199.00
25. SUBTOTAL (add Line 23 and Line 24).....	10199.00
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	20.00
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	10179.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 9

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

ABEL MALDONADO FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)

CHARLES P. CUSUMANO

Mailing Address 101 S. FIRST STREET, #400

City

BURBANK

State

CA

Zip Code

91502

FEC ID number of contributing
federal political committee.

C

Name of Employer

CUSUMANO REAL ESTATE GROUP

Occupation

REAL ESTATE DEVELOPER

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 5 / 2 0 1 1

Transaction ID: INCA60

Amount of Each Receipt this Period

2500.00

B.

Full Name (Last, First, Middle Initial)

CHARLES P. CUSUMANO

Mailing Address 101 S. FIRST STREET, #400

City

BURBANK

State

CA

Zip Code

91502

FEC ID number of contributing
federal political committee.

C

Name of Employer

CUSUMANO REAL ESTATE GROUP

Occupation

REAL ESTATE DEVELOPER

Receipt For: 2012

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 5 / 2 0 1 1

Transaction ID: INCA61

Amount of Each Receipt this Period

2500.00

C.

Full Name (Last, First, Middle Initial)

DAVID L. GILL

Mailing Address P.O. BOX 605

City

KING CITY

State

CA

Zip Code

93930

FEC ID number of contributing
federal political committee.

C

Name of Employer
GILCO PRODUCE

Occupation

OWNER

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 3 1 / 2 0 1 1

Transaction ID: INCA62

Amount of Each Receipt this Period

2500.00

SUBTOTAL of Receipts This Page (optional)

7500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 9

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

ABEL MALDONADO FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)

SUSAN GILL

Mailing Address P.O. BOX 605

City

KING CITY

State

CA

Zip Code

93930

FEC ID number of contributing
federal political committee.

C

Name of Employer
NONE

Occupation

HOMEMAKER

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 3 1 / 2 0 1 1

Transaction ID: INCA63

Amount of Each Receipt this Period

2500.00

SUBTOTAL of Receipts This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

10000.00

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
ABEL MALDONADO FOR CONGRESS**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
AMERICAN EXPRESSNature of Debt (Purpose):
CREDIT CARD

Mailing Address P.O. BOX 0001

City State ZIP Code
LOS ANGELES CA 90096

Outstanding Balance Beginning This Period

0.00

Transaction ID: PAYD259

Amount Incurred This Period

674.74

Payment This Period

0.00

Outstanding Balance at Close of This Period

674.74

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
AT&T MOBILITYNature of Debt (Purpose):
PHONE

Mailing Address P.O. BOX 6463

City State ZIP Code
CAROL STREAM IL 60197

Outstanding Balance Beginning This Period

0.00

Transaction ID: PAYD265

Amount Incurred This Period

328.36

Payment This Period

0.00

Outstanding Balance at Close of This Period

328.36

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
SUNSTAR MEDIANature of Debt (Purpose):
WEBSITE

Mailing Address 834 ABREGO STREET, SUITE B

City State ZIP Code
MONTEREY CA 93940

Outstanding Balance Beginning This Period

0.00

Transaction ID: PAYD275

Amount Incurred This Period

23.75

Payment This Period

0.00

Outstanding Balance at Close of This Period

23.75

1) **SUBTOTALS** This Period This Page (optional).....

1026.85

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 9 / 9

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
ABEL MALDONADO FOR CONGRESS**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
SUNSTAR MEDIANature of Debt (Purpose):
WEBSITE

Mailing Address 834 ABREGO STREET, SUITE B

City State ZIP Code
MONTEREY CA 93940

Outstanding Balance Beginning This Period

0.00

Transaction ID: PAYD276

Amount Incurred This Period

55.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

55.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
SUNSTAR MEDIANature of Debt (Purpose):
WEBSITE

Mailing Address 834 ABREGO STREET, SUITE B

City State ZIP Code
MONTEREY CA 93940

Outstanding Balance Beginning This Period

0.00

Transaction ID: PAYD277

Amount Incurred This Period

55.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

55.00

1) **SUBTOTALS** This Period This Page (optional).....

110.00

2) **TOTALS** This Period (last page this line number only).....

1136.85

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

1136.85